UNITED STATES DISTRICT COURT

for the

Western District of Pennsylvania					
LIVE FACE ON \	WEB LLC				
Plaintiff(s) v. COMPLETE FAMILY DENTISTRY P.C.		Civil Action No.			
Defendant(s)					
SUMMONS IN A CIVIL ACTION					
To: (Defendant's name and address)	COMPLETE FAMILY 80 HUFF AVENUE SUITE 1 GREENSBURG, PA				
A lawsuit has been file	d against you.				
are the United States or a Unite P. 12 (a)(2) or (3) — you must	ed States agency, or an serve on the plaintiff a edure. The answer or	NOVICH EET			
If you fail to respond, j You also must file your answer		ill be entered against you for the relief demanded in the complaint. urt.			
		CLERK OF COURT			
Date:		Signature of Clerk or Deputy Clerk			

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Civil Action No.

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (1))

was rec	This summons for (nan ceived by me on (date)	ne of individual and title, if any)				
	•	the summons on the individual at (place)			
		,	on (date)	; or		
	☐ I left the summons	at the individual's residence or usu	al place of abode with (name)			
	, a person of suitable age and discretion who resides th					
	on (date)	individual's last known address; or				
	\square I served the summons on (name of individual)					
	designated by law to accept service of process on behalf of (name of organization)					
			on (date)	; or		
	☐ I returned the sumn	nons unexecuted because		; or		
	☐ Other (specify):					
	My fees are \$	for travel and \$	for services, for a total of \$	0.00		
	I declare under penalty of perjury that this information is true.					
Date:						
			Server's signature			
			Server's address			

Additional information regarding attempted service, etc: